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DATE: October 17, 2005

PTO IDENTIFIER: Application Number 09/829737-Conf. #9630
Patent Number

Inventor: Chad A. SCHOETTGER

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: LAHIVE & COCKFIELD, LLP

John S. Curran

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Attorney Dkt. #: SMQ-064/P5765

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PAGES (Including Cover Sheet): 13

CONTENTS: Fee Transmittal (1 page in duplicate)
 One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page in duplicate)
 Notice of Appeal (1 page in duplicate)
 Pre-Appeal Brief Request for Review (5 pages)
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Application No. (If known): 09/829737

Attorney Docket No.: SMQ-064

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Fee Transmittal (1 page in duplicate)

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PTO/SB/17 (12-04v2)

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<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4819).</p> <p>FEES TRANSMITTAL For FY 2005</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		Complete If Known	
		Application Number	09/829737-Conf. #9630
		Filing Date	April 10, 2001
		First Named Inventor	Chad A. SCHOETTGER
		Examiner Name	T. T. Nguyen
Art Unit	2144		
TOTAL AMOUNT OF PAYMENT	(\$ 620.00)		
	Attorney Docket No. SMQ-064/P5765		

METHOD OF PAYMENT (check all that apply)

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<p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <p><input type="checkbox"/> Charge fee(s) indicated below</p> <p><input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee</p> <p><input type="checkbox"/> Credit any overpayments</p>				

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)

* 100 = _____ /50 _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	120.00
Other (e.g., late filing surcharge): 1251 Extension for response within first month	500.00
1401 Notice of appeal	

SUBMITTED BY		Signature: <i>John S. Curran</i>	Registration No. 50,445	Telephone (617) 227-7400
Signature				Date October 17, 2005
Name (Print/Type):		John S. Curran		

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Dated: October 17, 2005

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